

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Reynolds SupervisorIMPORTANT: Indicate type of committee you are reporting for: ☒

- (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
 (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
 (8) Support Slate of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name

REBECCA REYNOLDS

Political Party

DEMOCRAT

Office Sought

COUNTY SUPERVISOR

District (if Senate or House)

Constance K. Meek

SIGNATURE OF TREASURER (or person filing this report)

319/592-3335
TELEPHONEMAY 19, 2003
DATE SIGNED

FORM DR-2 (Rev. 01/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>57495</u>	
Indexed <u>SW</u>	
Audited _____	
Computer _____	

DISCLOSURE BOARD

MAY 20 2003

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:I AM FILING A May 19, 2003 REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR.
(report date)Indicate one ☒☐ CHECK IF AMENDMENT TO REPORT DATED _____☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

2-11-03

County & Local Committees, enter County in which Election is held

VAN BUREN**STATEMENT OF CASH ON HAND**CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.).....\$ -0-**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

3302.60

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)SUB-TOTAL.....\$ 3302.60**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) ...

3302.60

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

.....\$ -0-****UNPAID BILLS** (From Schedule D - Attach Schedule D)

.....\$

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

.....\$

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

.....\$

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

____ YES ____ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ _____

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Reynolds Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1-12-03	ID# CK#	Jack Brocky 807 Country Lane Rd Kossaugus, IA 52545		\$ 100.00	
1-12-03	ID# CK#	David Kirchner 402 2nd St Kossaugus, IA 52565		100.00	
1-12-03	ID# CK#	Cash - Pass the Hat unitemized contributions		150.00	
1-20-03	ID# CK#	Robert Osterhaus 216 Austin Maquoketa, IA 52060		50.00	
1-20-03	ID# CK#	Daniel Reynolds 8 Butterfield Circle Hossmoor, IL 60422	Procter	1000.00	
1-20-03	ID# CK#	Arthur Orrom PO Box 453 Kossaugus, IA 52565		50.00	
1-20-03	ID# CK#	John Whitaker 32500 145th St Hillsboro, IA 52630		50.00	
1-20-03	ID# CK#	Mary Bukta 604 S. 32nd St Clinton, IA 52732		50.00	
1-20-03	ID# CK#	Marcella Frevert 3655 450th Ave Emmetsburg, IA 50536		50.00	
1-29-03	ID# CK#	Carol Lovedip 14715 Morrow St Cantrel, IA 52542		53.50	
SUB-TOTAL				\$ 1658.50	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Reynolds Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1-29-03	ID# CK#	<i>Twila Peacock</i> 505 4th St Keosauqua, IA 52565		\$ 75.00	<input type="checkbox"/>
1-29-03	ID# CK#	<i>Jack Bowthorpe</i> 807 Country Lane Rd Keosauqua, IA 52565		78.00	<input type="checkbox"/>
1-29-03	ID# CK#	<i>Ronald Fransens</i> Rt 1 Milton, IA 52570		33.50	<input type="checkbox"/>
1-29-03	ID# CK#	<i>Max Reno</i> Box 454 Keosauqua, IA 52565		50.00	<input type="checkbox"/>
1-29-03	ID# CK#	<i>Shyla Bird</i> 18790 Jersey Ave Keosauqua, IA 52565		100.00	<input type="checkbox"/>
1-29-03	ID# CK#	<i>Op Hamlett</i> 101 2nd St Mt. Sterling 52573		100.00	<input type="checkbox"/>
1-29-03	ID# CK#	<i>Shyla Bird</i> 18790 Jersey Ave Keosauqua, IA 52565		100.00	<input type="checkbox"/>
1-29-03	ID# CK#	<i>Pat Kochterman</i> PO Box 115 Keosauqua, IA 52565		50.00	<input type="checkbox"/>
2-3-03	ID# CK#	<i>Patty Oudge</i> 100 Market St Des Moines, IA 50309		50.00	<input type="checkbox"/>
2-3-03	ID# CK#	<i>Edward Tallon</i> 1321 - 8th St Des Moines, IA 50314		50.00	<input type="checkbox"/>

SUB-TOTAL

\$686.50

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 3
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Reynolds Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
2-3-03	ID# CK#	<i>Evelyn Manning PO Box 476 Keosauqua, IA 52505</i>		<i>\$50.00</i>	<input type="checkbox"/>
2-5-03	ID# CK#	<i>Bob Holzapfel 27248 Deer Ave Cantel, IA 52542</i>		<i>40.00</i>	<input type="checkbox"/>
2-7-03	ID# CK#	<i>Max Reno PO Box 454 Keosauqua, IA 52505</i>		<i>50.00</i>	<input type="checkbox"/>
1-12-03 to 2-7-03	ID# CK#	<i>Unitemized Contributions</i>		<i>822.60</i>	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$962.60

TOTAL (if last page of this schedule)

\$3302.60

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 3
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Reynolds Supervisor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1-15-03	ID# CK# <i>Counter</i>	<i>Frontline graphics 204 S. 20th St Fairfield, IA 52556</i>	<i>printing</i>	<i>\$ 42.40</i>
1-17-03	ID# CK# <i>1001</i>	<i>Frontline graphics 204 S. 20th St. Fairfield, IA 52556</i>	<i>printing</i>	<i>169.60</i>
1-17-03	ID# CK# <i>1002</i>	<i>Ace Hardware Hwy 1 Keosauqua, IA 52565</i>	<i>paint</i>	<i>6.11</i>
2-21-03	ID# CK# <i>1006</i>	<i>Rebecca Reynolds PO Box 280 Bonaparte, IA 52620</i>	<i>paper, envelopes</i>	<i>41.85</i>
2-21-03	ID# CK# <i>1007</i>	<i>Rebecca Reynolds PO Box 280 Bonaparte, IA 52620</i>	<i>Dr. meals</i>	<i>27.00</i>
1-22-03	ID# CK# <i>1013</i>	<i>Walmart 1800 W. Burlington Fairfield, IA 52556</i>	<i>labels, tape</i>	<i>16.45</i>
1-24-03	ID# CK# <i>1014</i>	<i>Senior Center 801 Front Street Keosauqua, IA 52565</i>	<i>Hall rent</i>	<i>40.00</i>
1-24-03	ID# CK# <i>1015</i>	<i>Van Buren Register PO Box 477 Keosauqua, IA</i>	<i>adv.</i>	<i>334.96</i>
SUB-TOTAL				<i>\$ 678.37</i>
TOTAL (if last page of this schedule)				<i>\$</i>

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Reynolds Supervisor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
2-3-03	ID# CK# 1016	Van Buren Register PO Box 477 Keosauqua, IA	Ado.	\$ 284.04
2-5-03	ID# CK# 1017	Frontline Graphics Fairfield, IA	printing	101.76
2-5-03	ID# CK# 1018	USPS Keosauqua, IA	postage	297.10
2-10-03	ID# CK# 1019	Leader-Record Box 155 Farmington, IA 52626	Ado.	575.25
2-25-03	ID# CK# 1008	Rebecca Reynolds Box 280 Boripaster, IA	mileage	1080.04
3-13-03	ID# CK# 1003	Carol Lovelady 14715 Morrow St Condit, IA	paper	8.15
3-13-03	ID# CK# 1020	VISA Dell Computers	Computer Support	26.25
	ID# CK#			
SUB-TOTAL				\$ 2372.59
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(1).)

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
--------------------------------------	--------------------------

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Reynolds Supervisor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4-9-03	ID# CK# 1021	Voy Bureau Register PO Box 477 Keosauqua, IA 52905	adv.	\$ 25.40
5-14-03	ID# CK# 1009	V.B. County Democratic Party Jonie Whitaker Hillsboro, IA 52630	Contribution	226.24
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 251.64

TOTAL (if last page of this schedule) \$ 3302.60

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

Page 3 of 3

(for Schedule B)